

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	DT NO.	DATE
FEE DETERMINATION	PS	12	3/14
O.I.P.E. CLASSIFIER		65703	3/22
FORMALITY REVIEW			3-26-99

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)..... Canceled
 Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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